

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: Chronic Pain Management Clinics
Managed Care Plans
CSO Administrators
Regional Administrators

Memorandum No: 02-25 MAA
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From: Douglas Porter, Assistant Secretary
Medical Assistance Administration (MAA)

Supersedes: 01-24 MAA

Subject: Vendor Rate Increase for Chronic Pain Management Clinics

Effective for dates of service on and after July 1, 2002, the Medical Assistance Administration (MAA) will:

- Implement the updated Medicare Physician Fee Schedule Data Base (MPFSDB) Year 2002 relative value units (RVUs); and
- Implement a legislatively appropriated one and one-half (1.5) percent vendor rate increase.

Maximum Allowable Fees

The 2001-2003 Appropriations Act authorizes this one and one-half (1.5) percent vendor rate increase for MAA fee-for-service programs.

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The new maximum allowable fees are as follows:

Procedure Code	Brief Description	Maximum Allowable Fee Effective 7/1/02	
		Non-Facility Setting	Facility Setting
0070M*	Psychological Evaluation (testing included)	\$67.80	\$67.80
90801	Psychiatric diagnostic interview	90.32	85.54
90857	Interactive group psychotherapy	22.98	19.34
99221	Initial hospital care	40.49	40.49
99222	Initial hospital care	67.34	67.34
99223	Initial hospital care	93.96	93.96
99231	Subsequent hospital care	20.25	20.25
99232	Subsequent hospital care	33.44	33.44
99233	Subsequent hospital care	47.55	47.55
99238	Hospital discharge day	41.18	41.18
99239	Hospital discharge day	56.65	56.65
99241	Office consultation	29.35	20.70
99242	Office consultation	54.37	42.09
99243	Office consultation	72.34	55.96
99244	Office consultation	102.38	82.81
99245	Office consultation	132.63	109.88
99251	Initial inpatient consultation	21.61	21.61
99252	Initial inpatient consultation	43.23	43.23
99253	Initial inpatient consultation	59.15	59.15
99254	Initial inpatient consultation	85.09	85.09
99255	Initial inpatient consultation	117.16	117.16
99261	Follow-up inpatient consultation	13.42	13.42
99262	Follow-up inpatient consultation	27.07	27.07
99263	Follow-up inpatient consultation	40.27	40.27

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* State-unique procedure code

State-Unique Procedure Code	Brief Description	Maximum Allowable Fee Effective 7/1/02	
		Non-Facility Setting	Facility Setting
0088M*	<p><i>A Limited Vocational Evaluation</i>, including:</p> <ul style="list-style-type: none"> • Review of the client's medical records; • Consultation with attending pain clinic doctors; and • Preparation of consultation report (including work history, education, relevant social and economic factors, barriers and assets to employment, transferable skill identification, impression regarding potential employability, recommended plan). 	\$86.37	\$86.37
0089M*	<p><i>An Extended Vocational Evaluation</i>, including:</p> <ul style="list-style-type: none"> • All components of limited evaluation; • Time-limited activities designed to evaluate the client's demonstrated motivation, which is necessary for successful participation in the Chronic Pain Management program and in employment. Planning must be individualized, according to client need, and must be structured by means of a behavioral contract. The purpose of the extended evaluation is to resolve questions unanswered in the typical screening process so as to ensure appropriate treatment. 	\$172.70	\$172.70

* State-unique procedure code

To obtain this fee schedule electronically, go to MAA's website at <http://maa.dshs.wa.gov> (click on the Provider Publications/Fee Schedules link).

Bill MAA your usual and customary charge.